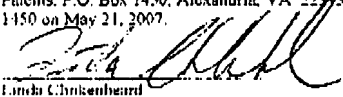
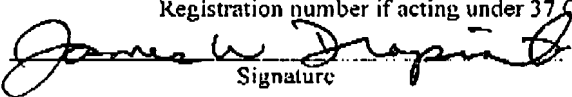


PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 043978-014000	RECEIVED CENTRAL FAX CENTER MAY 21 2007
I hereby certify that this correspondence is being transmitted by facsimile to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on May 21, 2007.  Linda Chisenhead		In re Application of Huber, et al.	
		Application Number: 10/080,996	Filed: February 20, 2002
For: CONTENT BASED VIDEO SELECTION			
		Group Art Unit: 2623	Examiner: Scott E. Beliveau
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.			
The requested extension and appropriate entity fee are as follows (check time period desired):			
<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$60/\$120)		\$ <u>120.00</u>	
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$225/\$450)		\$ _____	
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$510/\$1020)		\$ _____	
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$795/\$1590)		\$ _____	
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1080/\$2160)		\$ _____	
<input type="checkbox"/> Applicant claims small entity status.			
<input type="checkbox"/> A check to cover the fee is enclosed.			
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.			
<input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.			
<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>50-3557</u> . Enclosed is a duplicate copy of this sheet.			
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.			
I am the <input type="checkbox"/> applicant/inventor			
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).			
<input type="checkbox"/> attorney or agent of record.			
<input checked="" type="checkbox"/> attorney or agent under 37 CFR 1.34(a).			
Registration number if acting under 37 CFR 1.34(a) <u>46,242</u> .			
 Signature		May 21, 2007 Date	
<u>James W. Drapinski</u> Typed or printed name		<u>415 984-8200</u> Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
<input checked="" type="checkbox"/> Total of 1 forms are submitted			

SEND TO: Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

5546087 1